



ALABAMA DEPARTMENT OF REVENUE  
SALES, USE & BUSINESS TAX DIVISION

Application For License As An  
Automotive Dismantler and Parts Recycler

October 1, 2003 through September 30, 2004

LIC: 756-1 7/03

FOR OFFICE USE ONLY

Look Up

County \_\_\_\_\_

Motor Vehicle Dismantler (\$225.00 License) . . . . .  
Dismantler – Issuance Fee (\$1.00) . . . . .  
Dismantler – Late Penalty (15% of License Fee) . . . . .  
Interest – From Due Date (if delinquent) . . . . .  
Citation Fee (if cited) . . . . .  
**Total Due With Application** . . . . .


FOR OFFICE USE ONLY

Interest Begin Date \_\_\_\_\_

Interest End Date \_\_\_\_\_

*Worthless Checks Will Result In  
License Revocation*

1. \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
LEGAL NAME OF BUSINESS DBA NAME TELEPHONE NUMBER

MAILING ADDRESS CITY STATE ZIP

2. Form of Organization: ☐ Individual ☐ Partnership ☐ Limited Liability Company ☐ Corporation

Provide the information below. If individual, give owner; if partnership, give partners; if limited liability company, list all members; and if corporation, list officers and directors.

	NAME	TITLE	SOCIAL SECURITY NO.	HOME ADDRESS & CITY	HOME PHONE
A.	_____	_____	____ / ____ / ____	_____	_____
B.	_____	_____	____ / ____ / ____	_____	_____
C.	_____	_____	____ / ____ / ____	_____	_____

3. Show exact permanent location(s):

ADDRESS CITY ZIP

Primary Location \_\_\_\_\_

Second Location \_\_\_\_\_

Third Location \_\_\_\_\_

4. A. State Sales Tax Number \_\_\_\_\_  
B. Federal Employer ID Number \_\_\_\_\_  
C. Date Business Began \_\_\_\_\_  
D. Number of Employees \_\_\_\_\_  
E. License Issue Date \_\_\_\_\_

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Approved By: \_\_\_\_\_

Entered By: \_\_\_\_\_

Date: \_\_\_\_\_

Walk-In: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Bond Number: \_\_\_\_\_

5. The questions in part 5 must be answered by **ALL APPLICANTS**.

- |  | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
|--|------------------------------|-----------------------------|
| a. Were you a Licensed Dismantler during the prior license year? .....   | <input type="checkbox"/>     | <input type="checkbox"/>    |
| b. The law further requires that "every automotive dismantler and parts recycler shall keep a register of all purchases and sales of motor vehicles for five (5) years from the date of purchase or sale showing make, model, year, body style, vehicle identification number, and the name and address of purchaser or seller" (Section 40-12-419, <b>Code of Alabama 1975</b> ). Said records must be available and open at reasonable business hours on business days to state, county, and municipal law enforcement officers. Do you acknowledge awareness of this statement? ..... | <input type="checkbox"/>     | <input type="checkbox"/>    |
| c. Do you certify that the principal business locations reflected in this application for the license as an Automotive Dismantler and Parts Recycler meets all zoning requirements of the federal, state, and municipal laws, and complies with screening and beautification regulations declared in the Highway Beautification Act - Junkyard Control. ....   | <input type="checkbox"/>     | <input type="checkbox"/>    |
| d. Has the applicant, applicant's partner(s), corporate officer(s), or manager(s) ever knowingly dealt in stolen motor vehicles, parts, or accessories? .....  | <input type="checkbox"/>     | <input type="checkbox"/>    |
| e. Has the applicant, applicant's partner(s), corporate officer(s), or manager(s) ever filed a materially erroneous or fraudulent tax return (income tax, sales tax, etc.) with the Ala. Department of Revenue? ....   | <input type="checkbox"/>     | <input type="checkbox"/>    |
| f. Has the applicant, applicant's partner(s), corporate officer(s), or manager(s) had a felony conviction of a state or federal law involving theft, or been convicted of a violation of the Alabama Certificate of Title and Antitheft Act? .....   | <input type="checkbox"/>     | <input type="checkbox"/>    |

This statement is given as a requirement to be licensed under Section 40-12-412, **Code of Alabama 1975**

Under penalties of perjury that the above information is true, correct and complete to the best of my knowledge and belief.

\_\_\_\_\_  
Name of Firm or Company

\_\_\_\_\_  
Signature of Individual Owner, Partner, or Corporate Officer

\_\_\_\_\_  
Signature of Partner

\_\_\_\_\_  
Signature of Partner

Before me, the undersigned, a Notary Public in and for said State and County, on this day personally appeared the above-signed individual(s), who, after first being duly sworn by me, deposed and says that he has personal knowledge of the matter and things contained in this application; that he is duly authorized and empowered to verify the same, and the same are true and correct.

State of \_\_\_\_\_ County of \_\_\_\_\_

Subscribed and sworn to before me this

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_

Seal

**If you are located outside the city limits,  
please use this area to draw a map to your exact location.**